

PTO/SB/122
0057.0004

CHANGE OF CORRESPONDENCE ADDRESS		
Application Address to: Mail Stop Issue Fee Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450	Application Number	09/662,519
	Filing Date	September 14, 2000
	First Named Inventor	S.R. Lewallen
	Art Unit	2126
	Examiner Name	Phuong N. Hoang
	Attorney Docket Number	STL920000005US1

Please change the Correspondence Address for the above-identified patent application to:

☒ Customer Number: **24852**

OR

<input type="checkbox"/> Firm or Individual Name					
Address					
Address					
City		State		Zip	
Country					
Telephone		Fax			

This form cannot be used to change the data associated with a Customer Number. To change the data associated with an existing Customer Number use "Request for Customer Number Data Change" (PTO/SB/124)

I am the:

☐ Applicant/Inventor

☐ Assignee of Record of the entire interest. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

☒ Attorney or Agent of Record. Registration Number Registration No. 39,867.

☐ Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number _____

Typed or Printed Name	David W. Victor				
Signature					
Date	September 28, 2005		Telephone	(310) 553-7977	

Note: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.*

<input checked="" type="checkbox"/> *Total of <u>1</u> form is submitted.
